

Second Regular Session  
Seventy-first General Assembly  
STATE OF COLORADO

**REENGROSSED**

*This Version Includes All Amendments  
Adopted in the House of Introduction*

LLS NO. 18-1136.01 Jane Ritter x4342

**SENATE BILL 18-263**

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**SENATE SPONSORSHIP**

**Martinez Humenik, Cooke**

**HOUSE SPONSORSHIP**

**Singer and Landgraf,**

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**Senate Committees**

State, Veterans, & Military Affairs

**House Committees**

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**A BILL FOR AN ACT**

101 **CONCERNING THE CREATION OF A PILOT PROGRAM TO ALLOW FOR**  
102 **COURT APPROVAL OF TREATMENT MEDICATIONS IN JAILS.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

The bill creates a pilot program in the department of human services (department) to establish the safety and effectiveness of allowing a licensed psychiatrist to petition the court for authority to administer medications in a jail over the objection of a respondent. The advisory board to the department (advisory board) shall approve any applying jail for participation in the pilot program if it has established a contract with

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters or bold & italic numbers indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.

SENATE  
3rd Reading Unamended  
May 3, 2018

SENATE  
Amended 2nd Reading  
May 2, 2018

a facility designated by the department and also meets the minimum criteria established in the bill. The advisory board shall only authorize a maximum of 5 jails to participate in the pilot program. The pilot program will be monitored by the office of behavioral health.

The office of behavioral health and the sheriff or appropriate law enforcement for a jail applying to participate in the pilot program shall collaboratively develop requirements for a participating jail. Requirements for information and affirmations are to be included in the petition to the court. The department is required to report on the pilot program on or before December 31, 2021.

The pilot program is repealed, effective September 1, 2022.

Language is clarified concerning hearings and jurisdiction in cases brought to the court for mental health proceedings, including involuntary administration of medications and certifications. If such a case is presented to a jury, the jury shall only hear evidence on the issue of whether the person has a mental health disorder and, as a result of such mental health disorder, is a danger to others or to himself or herself or is gravely disabled.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** In Colorado Revised Statutes, 27-65-102, **add**  
3 (12.5) as follows:

4 **27-65-102. Definitions.** As used in this article 65, unless the  
5 context otherwise requires:

6 (12.5) "OFFICE OF BEHAVIORAL HEALTH" MEANS THE OFFICE OF  
7 BEHAVIORAL HEALTH IN THE DEPARTMENT.

8 **SECTION 2.** In Colorado Revised Statutes, **add** 27-65-132 as  
9 follows:

10 **27-65-132. Pilot program to allow for court approval of**  
11 **treatment medications in jails - creation - purpose - requirements -**  
12 **reporting - rules - repeal.** (1) THERE IS CREATED IN THE DEPARTMENT  
13 A PILOT PROGRAM TO ALLOW FOR COURT APPROVAL OF TREATMENT  
14 MEDICATIONS IN JAILS, REFERRED TO IN THIS SECTION AS THE "PILOT  
15 PROGRAM". THE PURPOSE OF THE PILOT PROGRAM IS TO DETERMINE AND,

1 IF APPROPRIATE, ESTABLISH THE SAFETY AND EFFECTIVENESS OF  
2 ALLOWING A LICENSED PSYCHIATRIST TO PETITION, AS PROVIDED FOR IN  
3 SUBSECTION (2) OF THIS SECTION, A DISTRICT COURT OF APPROPRIATE  
4 JURISDICTION THAT IS SITTING AS PROBATE COURT FOR AUTHORITY TO  
5 ADMINISTER MEDICATIONS IN THE JAIL, OVER THE OBJECTION OF A  
6 RESPONDENT, PURSUANT TO SECTION 27-65-111 (5). FIVE OR FEWER JAILS  
7 MAY PARTICIPATE IN THE PILOT PROGRAM AFTER SEEKING AND OBTAINING  
8 WRITTEN APPROVAL BASED ON THE REQUIREMENTS ESTABLISHED BY THE  
9 ADVISORY BOARD ESTABLISHED IN SECTION 27-65-131, REFERRED TO IN  
10 THIS SECTION AS THE "ADVISORY BOARD". PRIOR TO APPROVING A JAIL TO  
11 PARTICIPATE IN THE PILOT PROGRAM, THE ADVISORY BOARD SHALL SEEK  
12 INPUT FROM A MEMBERSHIP ASSOCIATION THAT REPRESENTS DEFENSE  
13 ATTORNEYS WITH EXPERIENCE WORKING WITH RESPONDENTS WHO HAVE  
14 MENTAL HEALTH ISSUES. ONCE APPROVED AS A PARTICIPANT IN THE PILOT  
15 PROGRAM, THE APPROVED JAIL IS SUBJECT TO OVERSIGHT AND  
16 MONITORING BY THE OFFICE OF BEHAVIORAL HEALTH AND WILL BE  
17 REQUIRED TO REMAIN IN CONTINUED COMPLIANCE WITH RULES  
18 PROMULGATED BY THE DEPARTMENT, PURSUANT TO SUBSECTION (6) OF  
19 THIS SECTION, INCLUDING RULES THAT ENSURE THAT RESPONDENTS  
20 RECEIVING PSYCHOTROPIC MEDICATIONS HAVE ACCESS TO APPROPRIATE  
21 AND NECESSARY HEALTH CARE OVERSIGHT AND SERVICES. A JAIL MAY  
22 NOT PARTICIPATE IN THE PILOT PROGRAM UNTIL THE DEPARTMENT HAS  
23 ADOPTED RULES PURSUANT TO SUBSECTION (6) OF THIS SECTION.

24 (2) (a) THE PETITION TO THE COURT REQUIRED BY SUBSECTION (1)  
25 OF THIS SECTION MUST INCLUDE THE FOLLOWING INFORMATION AND  
26 ASSERTIONS:

27 (I) THAT THE RESPONDENT IS NOT COMPETENT TO EFFECTIVELY

1 PARTICIPATE IN TREATMENT DECISIONS REGARDING MEDICATIONS;

2 (II) THAT THE REQUESTED MEDICATIONS ARE NECESSARY TO  
3 PREVENT A SIGNIFICANT AND LIKELY LONG-TERM DETERIORATION IN THE  
4 RESPONDENT'S MENTAL HEALTH CONDITION AND ARE NECESSARY TO  
5 REDUCE THE LIKELIHOOD THAT THE RESPONDENT MAY CAUSE SERIOUS  
6 HARM TO HIMSELF OR HERSELF OR TO OTHERS IN THE JAIL;

7 (III) THAT A VIABLE, LESS INVASIVE TREATMENT ALTERNATIVE IS  
8 NOT AVAILABLE;

9 (IV) THAT THE RESPONDENT'S NEED FOR TREATMENT BY  
10 PSYCHOTROPIC MEDICATION IS SUFFICIENTLY COMPELLING TO OVERRIDE  
11 ANY BONAFIDE AND LEGITIMATE INTERESTS OF THE RESPONDENT IN  
12 REFUSING TREATMENT; AND

13 (V) WHAT CLASS OR NAME OF MEDICATION IS BEING  
14 RECOMMENDED AS MORE LIKELY THAN NOT BENEFICIAL TO THE  
15 RESPONDENT.

16 (b) THE COURT SHALL GRANT A PETITION FOR ADMINISTRATION OF  
17 INVOLUNTARY MEDICATIONS FOR A MAXIMUM PERIOD OF THREE MONTHS  
18 THAT IS TRANSFERABLE BETWEEN JAILS PARTICIPATING IN THE PILOT  
19 PROGRAM. PRIOR TO THE CONCLUSION OF THE THREE-MONTH  
20 AUTHORIZATION PERIOD, IF THE CRITERIA SET FORTH IN THE ORIGINAL  
21 PETITION STILL EXISTS, THE LICENSED PSYCHIATRIST MAY PETITION THE  
22 COURT FOR AN ADDITIONAL THREE-MONTH PERIOD DURING WHICH TO  
23 ADMINISTER THE AUTHORIZED MEDICATIONS. THE CRITERIA FOR  
24 MEDICATION MUST INCLUDE:

25 (I) MEDICATION AVAILABILITY IN THE JAIL IN WHICH THE  
26 RESPONDENT IS HELD; AND

27 (II) IDENTIFICATION OF LESS INTRUSIVE METHODS ALREADY

1 ATTEMPTED.

2 (3) THE ADVISORY BOARD SHALL MAKE RECOMMENDATIONS TO  
3 THE EXECUTIVE DIRECTOR FOR UP TO FIVE JAILS TO PARTICIPATE IN THE  
4 PILOT PROGRAM. ALL RECOMMENDATIONS FROM THE ADVISORY BOARD TO  
5 THE EXECUTIVE DIRECTOR MUST HAVE RECEIVED TWO-THIRDS APPROVAL  
6 PRIOR TO THE EXECUTIVE DIRECTOR IMPLEMENTING THE PILOT PROGRAM.  
7 ANY APPLYING JAIL MUST HAVE ESTABLISHED A CONTRACT WITH A  
8 FACILITY, AS DEFINED IN SECTION 27-65-102 (7), DESIGNATED BY THE  
9 EXECUTIVE DIRECTOR PURSUANT TO THIS ARTICLE 65 AND BE ABLE TO  
10 CONTINUOUSLY MEET THE MINIMUM CRITERIA SET FORTH IN THIS  
11 SUBSECTION (3) AND ANY REQUIREMENTS OF RULES TO BE PROMULGATED  
12 BY THE DEPARTMENT DURING THE TIME PERIOD IT IS A PARTICIPANT. THE  
13 EXECUTIVE DIRECTOR SHALL NOT APPROVE MORE THAN FIVE JAILS TO  
14 PARTICIPATE IN THE PILOT PROGRAM. THE MINIMUM CRITERIA TO BE MET,  
15 AS DETERMINED BY RULE AND AS DETERMINED COLLABORATIVELY  
16 BETWEEN THE OFFICE OF BEHAVIORAL HEALTH AND THE SHERIFFS OR LAW  
17 ENFORCEMENT RESPONSIBLE FOR AN APPLYING JAIL, INCLUDE:

18 (a) MAINTAIN A MEMORANDUM OF AGREEMENT WITH THE CLOSEST  
19 HOSPITAL TO THE JAIL THAT IS ACCREDITED BY A NATIONALLY  
20 RECOGNIZED ORGANIZATION FOR THE PROVISION OF HEALTH SERVICES IF  
21 AT ANY TIME THERE IS AN ADVERSE EFFECT FROM THE ADMINISTRATION  
22 OF TREATMENT MEDICATIONS THROUGH THE PILOT PROGRAM;

23 (b) MAINTAIN THE ABILITY TO TRANSFER CARE, UPON A  
24 RESPONDENT'S RELEASE, TO A MENTAL HEALTH AGENCY THAT IS  
25 APPROVED BY THE OFFICE OF BEHAVIORAL HEALTH AND THAT IS EASILY  
26 ACCESSIBLE TO THE RESPONDENT. AN APPOINTMENT MUST BE MADE WITH  
27 THE APPROPRIATE MENTAL HEALTH AGENCY ON THE RESPONDENT'S

1 BEHALF FOR NO LATER THAN SEVENTY-TWO HOURS UPON HIS OR HER  
2 RELEASE. THE OFFICE OF BEHAVIORAL HEALTH SHALL CONTRACT FOR  
3 TRANSITIONAL SERVICES TO BE AVAILABLE FOR RESPONDENTS WHO HAVE  
4 BEEN APPROVED BY THE COURT FOR THE ADMINISTRATION OF TREATMENT  
5 MEDICATIONS IN A JAIL THAT IS PARTICIPATING IN THE PILOT PROGRAM.

6 (c) (I) HAVE TWENTY-FOUR-HOUR ACCESS TO A TREATING  
7 PSYCHIATRIST, EITHER EMPLOYED OR UNDER CONTRACT, WHO IS  
8 RESPONSIBLE FOR THE EVALUATION AND TREATMENT OF EACH INDIVIDUAL  
9 WHO IS ADMINISTERED MEDICATIONS PURSUANT TO THIS SECTION. THE  
10 TREATING PSYCHIATRIST MAY DELEGATE PARTS OF HIS OR HER DUTIES,  
11 EXCEPT AS LIMITED BY SUBSECTION (3)(c)(II) OF THIS SECTION, LICENSING  
12 STATUTES, THE MEMORANDUM OF AGREEMENT, OR THE PROVISIONS OF  
13 THIS SECTION OR RULES PROMULGATED BY THE DEPARTMENT.

14 (II) ENSURE THAT THE PSYCHIATRIST WHO SIGNS THE PETITION TO  
15 THE COURT FOR THE ADMINISTRATION OF TREATMENT MEDICATIONS  
16 PURSUANT TO THIS SECTION HAS CONDUCTED AN IN-PERSON EVALUATION  
17 OF THE RESPONDENT PRIOR TO SIGNING THE PETITION TO THE COURT;

18 (d) ENSURE THAT A RESPONDENT WHO WAS APPROVED BY THE  
19 COURT TO RECEIVE TREATMENT MEDICATIONS AGAINST HIS OR HER WILL  
20 IS MONITORED DAILY BY A LICENSED PSYCHIATRIST, PSYCHIATRIC  
21 REGISTERED NURSE, PSYCHIATRIC PHYSICIAN'S ASSISTANT, LICENSED  
22 PROFESSIONAL COUNSELOR, LICENSED PSYCHOLOGIST, OR LICENSED  
23 CLINICAL SOCIAL WORKER; AND

24 (e) MAINTAIN CONFIDENTIAL INDIVIDUAL DOCUMENTATION ON  
25 TREATMENT MEDICATIONS ADMINISTERED IN THE JAIL THROUGH THE PILOT  
26 PROGRAM AS FOLLOWS:

27 (I) PSYCHIATRIC MEDICATIONS THAT WERE REQUESTED, ANY

1 ADVERSE EFFECTS EXPERIENCED BY THE RESPONDENT WHO RECEIVED  
2 SUCH MEDICATIONS, WHAT ACTIONS WERE TAKEN BY THE JAIL WHEN  
3 ADVERSE EFFECTS OCCURRED, AND ANY OUTCOMES FROM ADVERSE  
4 EFFECTS OF PSYCHIATRIC MEDICATIONS ADMINISTERED THROUGH THE  
5 PILOT PROGRAM;

6 (II) THE CRIME AND CHARGE FOR WHICH THE RESPONDENT WAS IN  
7 CUSTODY;

8 (III) THE RESPONDENT'S BOND ELIGIBILITY;

9 (IV) THE AMOUNT OF TIME THE RESPONDENT WAS IN CUSTODY,  
10 INCLUDING THE DATE OF BOOKING INTO THE JAIL AND THE DATE OF  
11 RELEASE;

12 (V) DATA CONCERNING THE TRANSITIONAL APPOINTMENT WITH A  
13 MENTAL HEALTH AGENCY, INCLUDING THE DATE OF THE APPOINTMENT  
14 AND NAME OF THE MENTAL HEALTH AGENCY;

15 (VI) DOCUMENTATION ON EFFORTS MADE TO ENCOURAGE THE  
16 RESPONDENT TO TAKE THE PRESCRIBED MEDICATIONS VOLUNTARILY;

17 (VII) DOCUMENTATION ON EFFORTS TO FIND AN AVAILABLE BED  
18 IN THE COMMUNITY FOR BEHAVIORAL HEALTH TREATMENT, IF  
19 APPROPRIATE; ==

20 (VIII) ANY OTHER INDIVIDUAL DATA AS DETERMINED NECESSARY  
21 BY THE DEPARTMENT NECESSARY FOR ONGOING TREATMENT PURPOSES;

22 (IX) ESTABLISHMENT OF STANDARDS AND PROTOCOLS FOR  
23 DOCUMENTATION AND OBSERVATION OF THE RESPONDENT'S BEHAVIOR,  
24 ESPECIALLY WITHIN THE FIRST FORTY-EIGHT HOURS FOLLOWING THE  
25 ADMINISTRATION OF THE MEDICATION. STANDARDS AND PROTOCOLS MUST  
26 INCLUDE, BUT NEED NOT BE LIMITED TO, ADVERSE EFFECTS OF THE  
27 MEDICATION AS EXPERIENCED BY THE RESPONDENT; ANY ASSAULTIVE

1 BEHAVIOR; AND ANY NEW CHARGES FILED DURING OR THROUGHOUT THE  
2 COURSE OF THE ADMINISTRATION OF MEDICATION.

3 (X) ESTABLISHMENT OF STANDARDS AND PROTOCOLS FOR  
4 DOCUMENTING CRITICAL INCIDENTS, INCLUDING BUT NOT LIMITED TO  
5 SANCTIONING OR CLOSING A PILOT PROGRAM THAT FAILS TO ADHERE TO  
6 THE RULES ESTABLISHED BY THE STATE BOARD OF HUMAN SERVICES.

7 (4) ON OR BEFORE DECEMBER 31, 2020, THE DEPARTMENT SHALL  
8 SUBMIT A REPORT TO THE PUBLIC HEALTH CARE AND HUMAN SERVICES  
9 COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND  
10 HUMAN SERVICES COMMITTEE OF THE SENATE, OR ANY SUCCESSOR  
11 COMMITTEES, DURING THE "STATE MEASUREMENT FOR ACCOUNTABLE,  
12 RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" HEARING  
13 REQUIRED BY SECTION 2-7-203, CONCERNING THE STATUS OF THE PILOT  
14 PROGRAM AND ANY STATISTICALLY RELEVANT DATA.

15 (5) ON OR BEFORE DECEMBER 31, 2021, IF THE ADVISORY BOARD  
16 APPROVES ANY JAIL TO PARTICIPATE IN THE PILOT PROGRAM PURSUANT TO  
17 SUBSECTION (1) OF THIS SECTION, THE DEPARTMENT SHALL PROVIDE A  
18 SUMMARY REPORT CONCERNING THE SAFETY AND EFFECTIVENESS OF THE  
19 PROGRAM TO THE PUBLIC HEALTH CARE AND HUMAN SERVICES COMMITTEE  
20 OF THE HOUSE OF REPRESENTATIVES, THE HEALTH AND HUMAN SERVICES  
21 COMMITTEE OF THE SENATE, AND THE LEGISLATIVE OVERSIGHT  
22 COMMITTEE CONCERNING THE TREATMENT OF PERSONS WITH MENTAL  
23 HEALTH DISORDERS IN THE CRIMINAL AND JUVENILE JUSTICE SYSTEMS, OR  
24 ANY SUCCESSOR COMMITTEES. AT A MINIMUM, THE REPORT MUST INCLUDE  
25 SUMMARY DATA THAT DOES NOT INCLUDE ANY PERSONALLY IDENTIFYING  
26 INFORMATION AND:

27 (a) A SUMMARY OF PSYCHIATRIC MEDICATIONS REQUESTED AND



1 ADMINISTERED THROUGH THE PILOT PROGRAM;

2 (b) THE AVERAGE AMOUNT OF TIME OF CUSTODY FOR  
3 RESPONDENTS WHO WERE ADMINISTERED MEDICATIONS THROUGH THE  
4 PILOT PROGRAM;

5 (c) A SUMMARY LIST OF THE CRIMES WITH WHICH RESPONDENTS  
6 WHO WERE ADMINISTERED MEDICATIONS THROUGH THE PILOT PROGRAM  
7 WERE CHARGED;

8 (d) A SUMMARY OF DATA RELATED TO APPOINTMENTS AT MENTAL  
9 HEALTH AGENCIES AFTER RELEASE FOR RESPONDENTS WHO WERE  
10 ADMINISTERED MEDICATIONS THROUGH THE PILOT PROGRAM; AND

11 (e) ANY OTHER SUMMARY INFORMATION DETERMINED NECESSARY  
12 BY THE DEPARTMENT.

13 (6) ON OR BEFORE AUGUST 1, 2018, THE DEPARTMENT SHALL  
14 PROMULGATE RULES AS NECESSARY TO CONSISTENTLY ENFORCE THE  
15 PROVISIONS OF THIS SECTION, INCLUDING BUT NOT LIMITED TO:

16 (a) THE MINIMUM NECESSARY CONTENTS OF THE MEMORANDUM  
17 OF AGREEMENT BETWEEN A JAIL AND A HOSPITAL;

18 (b) A REQUIREMENT THAT ENSURES THAT RESPONDENTS  
19 RECEIVING PSYCHOTROPIC MEDICATIONS HAVE ACCESS TO APPROPRIATE  
20 AND NECESSARY HEALTH CARE OVERSIGHT AND SERVICES;

21 (c) DISCIPLINARY ACTIONS THAT WILL OCCUR IF A JAIL THAT IS  
22 PARTICIPATING IN THE PILOT PROGRAM IS OUT OF COMPLIANCE WITH THE  
23 PARAMETERS OF THE PILOT PROGRAM ESTABLISHED PURSUANT TO THIS  
24 SECTION; AND

25 (d) REGULATIONS FOR PSYCHIATRIC MEDICATIONS.

26 (7) THIS SECTION IS REPEALED, EFFECTIVE SEPTEMBER 1, 2022.

27 **SECTION 3.** In Colorado Revised Statutes, 27-65-111, **amend**

1 (1), (4), and (5) as follows:

2 **27-65-111. Hearing procedures - jurisdiction.** (1) Hearings A  
3 HEARING before the court pursuant to section 27-65-107, 27-65-108, ~~or~~  
4 27-65-109, ~~are~~ OR 27-65-132 IS conducted in the same manner as other  
5 civil proceedings before the court. The burden of proof is on the person  
6 or facility seeking to detain OR FORCIBLY MEDICATE the respondent. The  
7 court or jury shall determine that the respondent is in need of care and  
8 treatment only if the court or jury finds by clear and convincing evidence  
9 that the person has a mental health disorder and, as a result of the mental  
10 health disorder, is a danger to others or to himself or herself or is gravely  
11 disabled.

12 (4) The court in which the petition is filed ~~under~~ PURSUANT TO  
13 section 27-65-106 OR 27-65-132 or the certification is filed ~~under~~  
14 PURSUANT TO section 27-65-107 ~~shall be~~ IS the court of original  
15 jurisdiction and of continuing jurisdiction for any further proceedings  
16 ~~under this article~~ PURSUANT TO THIS ARTICLE 65. When the convenience  
17 of the parties and the ends of justice would be promoted by a change in  
18 the court having jurisdiction, the court may order a transfer of the  
19 proceeding to another county. Until further order of the transferee court,  
20 if any, it ~~shall be~~ IS the court of continuing jurisdiction.

21 (5) (a) (I) ~~In the event that a respondent or a person found not~~  
22 ~~guilty by reason of impaired mental condition pursuant to section~~  
23 ~~16-8-103.5 (5), C.R.S., or by reason of insanity pursuant to section~~  
24 ~~16-8-105 (4) or 16-8-105.5, C.R.S., refuses to accept medication, the~~  
25 ~~court having jurisdiction of the action pursuant to subsection (4) of this~~  
26 ~~section, the court committing the person or defendant to the custody of~~  
27 ~~the department pursuant to section 16-8-103.5 (5), 16-8-105 (4), or~~

1 ~~16-8-105.5, C.R.S., or the court of the jurisdiction in which the~~  
2 ~~designated facility treating the respondent or person is located shall have~~  
3 IN THE EVENT THAT A RESPONDENT WHO IS SUBJECT TO PROCEEDINGS  
4 PURSUANT TO SUBSECTION (4) OF THIS SECTION REFUSES TO ACCEPT  
5 MEDICATION OR OTHER RECOMMENDED TREATMENTS, THE COURT HAVING  
6 JURISDICTION OF THE ACTION PURSUANT TO SUBSECTION (4) OF THIS  
7 SECTION HAS JURISDICTION AND VENUE TO ACCEPT A PETITION BY A  
8 TREATING PHYSICIAN AND TO ENTER AN ORDER REQUIRING THAT THE  
9 RESPONDENT OR PERSON ACCEPT SUCH MEDICATION OR TREATMENT OR,  
10 IN THE ALTERNATIVE, THAT THE REQUESTED MEDICATION BE FORCIBLY  
11 ADMINISTERED TO HIM OR HER. UPON THE FILING OF SUCH A PETITION, THE  
12 COURT SHALL APPOINT AN ATTORNEY, IF ONE HAS NOT BEEN APPOINTED,  
13 TO REPRESENT THE RESPONDENT OR PERSON AND HEAR THE MATTER  
14 WITHIN TEN DAYS.

15 (II) IN THE EVENT THAT A PERSON WHO IS FOUND NOT GUILTY BY  
16 REASON OF IMPAIRED MENTAL CONDITION PURSUANT TO SECTION  
17 16-8-103.5 (5), OR BY REASON OF INSANITY PURSUANT TO SECTION  
18 16-8-105 (4) OR 16-8-105.5, REFUSES TO ACCEPT MEDICATION, THE COURT  
19 COMMITTING THE PERSON OR DEFENDANT TO THE CUSTODY OF THE  
20 DEPARTMENT PURSUANT TO SECTION 16-8-103.5 (5), 16-8-105 (4), OR  
21 16-8-105.5 HAS jurisdiction and venue to accept a petition by a treating  
22 physician and to enter an order requiring that the respondent or person  
23 accept such treatment or, in the alternative, that the medication be forcibly  
24 administered to him or her. The court of the jurisdiction in which the  
25 designated facility is located shall not exercise its jurisdiction without the  
26 permission of the court that committed the person to the custody of the  
27 department. Upon the filing of such a petition, the court shall appoint an

1 attorney, if one has not been appointed, to represent the respondent or  
2 person and hear the matter within ten days.

3 (b) In any case brought ~~under paragraph (a) of this subsection (5)~~  
4 PURSUANT TO SUBSECTION (5)(a)(II) OF THIS SECTION in a court for the  
5 county in which the treating facility is located, the county where the  
6 proceeding was initiated pursuant to subsection (4) of this section or the  
7 court committing the person to the custody of the department pursuant to  
8 section 16-8-103.5 (5), 16-8-105 (4), or 16-8-105.5, ~~€R.S.~~, shall either  
9 reimburse the county in which the proceeding pursuant to this subsection  
10 (5) was filed and in which the proceeding was held for the reasonable  
11 costs incurred in conducting the proceeding or conduct the proceeding  
12 itself using its own personnel and resources, including its own district or  
13 county attorney, as the case may be.

14 (c) In the case of a defendant who is found incompetent to  
15 proceed pursuant to section 16-8.5-103 ~~€R.S.~~, and who refuses to accept  
16 medication, the jurisdiction for the petition for involuntary treatment  
17 procedures ~~shall be~~ IS as set forth in section 16-8.5-112. ~~€R.S.~~

18 **SECTION 4. Safety clause.** The general assembly hereby finds,  
19 determines, and declares that this act is necessary for the immediate  
20 preservation of the public peace, health, and safety.